



DEPARTMENT OF THE NAVY

OFFICER IN CHARGE
NAVAL SUPPORT ACTIVITY, NORFOLK
NORTHWEST ANNEX
1320 NORTHWEST BLVD, SUITE 100
CHESAPEAKE, VIRGINIA 23322-4094

NAVSUPPACTNWINST 11011.11
N02

AUG 08 2005

NAVSUPPACT NORTHWEST INSTRUCTION 11011.11

Subj: TENANT ACTIVITY SITE APPROVAL PROCESS

Ref: (a) COMNAVREGMIDLANTINST 11011.11 (Site Approval Process)
(b) ELECTROMAGNETIC INTERFERENCE (EMI) RESTRICTIONS at NSA
NORTHWEST FOR ROTHF OPERATIONS of 16 JUN 04
(c) COMNAVREGMIDLANTINST 11011.12 (Obtaining Work Permits)
(d) COMNAVREGMIDLANTINST 11010.45 (Space Management)

Encl: (1) Sample Site Approval Request (with (3) enclosures)
(2) EMI Zone Map

1. Purpose. Provide guidance in addition to the policy of reference (a), for preparing and processing Site Approvals (SA) at Naval Support Activity, Northwest (NSA NW) Annex, to include review of SA by the Relocatable Over-the-Horizon Radar (ROTHR) Program Office/Forces Surveillance Support Center (FSSC).

2. Background

a. Reference (a) establishes SA submission guidelines for activities under the control of Commander, Navy Region, Mid-Atlantic (CNRMA). This instruction is to be used along with reference (a) for SA submissions at NSA NW Annex.

b. Reference (b) outlines restrictions to construction in and around the ROTHR Antenna Electromagnetic Interference (EMI) Prohibited Zones.

c. Reference (c) and (d) are provided for your information. Tenant activity Facility Managers/Operations Officers and Executive Staff should be familiar with these instructions.

d. Reference (c) outlines the procedures for obtaining permits for new construction, repair, and alteration of all CNRMA Class I or Class II property.

e. Reference (d) provides guidelines for space allocation in the Mid-Atlantic Region.

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3. Policy

a. NSA NW Annex tenant activities desiring to submit a construction project will follow the format in enclosure (1). When completed, enclosure (1) will be submitted to the NSA NW Annex Public Works Officer (PWO). Requests will include NAVFAC Form 11010/31, "Request For Project Site Approval", Part I Section A and II (if applicable), per reference (a).

(1) SA requests will contain, at a minimum: the proposed facility (i.e. new building, or extension to existing building, etc.), reason for request, building materials, point of contact (POC), building use, electronic equipment to be contained in the proposed facility, and site map. When completing enclosure (1) special attention should be given to reference (b), and completion of the EMI Questionnaire, (enclosure (3) to enclosure (1)).

(2) NSA NW Annex PWO shall receive and forward all completed requests to the CNRMA Regional Engineer (RE), copy to NSA NW Annex Officer-in-Charge (OIC).

(3) NSA NW Annex OIC will review all SAs and determine if ROTHr review is required.

(4) If ROTHr review is deemed necessary, then the OIC will forward the SA to ROTHr for review and comment. ROTHr will forward comments in writing to PWO within 14 days of receipt. ROTHr may contact the submitting activity during the review process to request additional time and/or information. OIC NSA NW Annex will be final approval authority for any extensions.

(5) CNRMA RE shall concurrently conduct their independent review per reference (a).

(6) Once ROTHr review is complete, the PWO will notify CNRMA RE and OIC NSA NW Annex via email that ROTHr has studied the EMI aspects of the project and has determined that:

(a) No impact exists, or

(b) Their recommendations for mitigation to EMI discovered. ROTHr will work directly with the submitting activity to come to a mutually acceptable agreement.

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(7) CNRMA RE shall complete SA signature process per reference (a), and provide final approved copy to the PWO for distribution to all parties.



A. J. MCMENAMIN

Distribution: (NAVSUPPACTNORVAINST 5216.1R)
List V through VII
NSA CO
NSA XO
NSA Admin Officer
CNRMA RE

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Activity Letterhead

From: Commanding Officer / Officer in Charge, Activity Name
To: Commander, Navy Region, Mid-Atlantic (Attn: Regional Engineer)

Subj: FACILITIES REQUEST FOR PROPOSED BUILDING/PROJECT

Ref: Any references needed to support your request.

Encl: (1) NAVFAC Form 11010/31, PART I Section A & II (if applicable)
(2) Site Drawing
(3) EMI Questionnaire

1. SA requests will contain, at a minimum: the proposed facility (i.e. new building, or extension to existing building, etc.), reason for request, building materials, point of contact (POC), building use, electronic equipment to be contained in the proposed facility, and site map. When completing enclosure (1) special attention should be given to reference (b), and completion of the EMI Questionnaire, (enclosure (3) to enclosure (1)).

2. Activity POC is _____, Phone _____

CO/OIC SIGNATURE

Copy to:
NSA Northwest Annex PWO

Encl (1)

REQUEST FOR PROJECT SITE APPROVAL/EXPLOSIVES SAFETY CERTIFICATION NAVFAC 11010/31 (REV. 5-2001)

**PART I
INSTRUCTIONS IN NAVFACINST 11010.45**

SECTION A - INSTALLATION SUBMISSION

1. To:		2. From:	
3. Program Year:	4. Cost (\$000):	5. Type Funding:	6. Activity UIC:
7. Date:			8. Category Code and Project Title:
9. Project			10. Type of Project:
<input type="checkbox"/> New Construction <input type="checkbox"/> Change Use <input type="checkbox"/> Addition to Existing <input type="checkbox"/> Major Modification to Existing Facility			<input type="checkbox"/> Relocation of Structure <input type="checkbox"/> Maintenance and/or Repairs <input type="checkbox"/> Repair By Replacement <input type="checkbox"/> Demolition
11. Type of Request:			12. Project Description:
<input type="checkbox"/> Airfield Safety Site <input type="checkbox"/> Explosives Site/Safety <input type="checkbox"/> EMR Site Approval <input type="checkbox"/> Resubmittal or Standard Site Approval			
13. _____ Set(s) of Project Maps Attached		14. _____ Set(s) Part II Division(s) Attached	

SECTION B - EFD REVIEW

1. Name/Code/Phone No. of Reviewer/ E-Mail Address:		2. Date:
3. Evaluation:		
4. Safety Review Requested: (check appropriate box(es))		5. Date:
<input type="checkbox"/> NOSSA <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> CNO <input type="checkbox"/> OTHER		
5. Date of Safety Certification:		
_____ NOSSA _____ DDESB _____ SPAWAR _____ NAVAIR _____ CNO _____ OTHER		

SECTION C - FINAL SITE APPROVAL ACTION

1. Approvals:		2. Certification Identification:	
<input type="checkbox"/> Site Approved <input type="checkbox"/> Site Disapproved <input type="checkbox"/> Deferred/Returned <input type="checkbox"/> Explosives Safety Certification <input type="checkbox"/> Explosives Safety Certification <input type="checkbox"/> Interim Construction Waiver Approved		3. Remarks:	
4. Other Required:		5. Approving	6. Date:
<input type="checkbox"/> Airfield Safety Waiver <input type="checkbox"/> Final Explosives Safety			

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REQUEST FOR PROJECT SITE APPROVAL/EXPLOSIVES SAFETY CERTIFICATION NAVFAC 11010/31 (REV. 5-2001) PART II DIVISION A – EXPLOSIVES SAFETY INSTRUCTIONS IN NAVFACINST 11010.45																		
1. NEW/Class/Division/ESQD arcs * of project:																		
2. CNO Waivers and Exemptions:																		
3. Personnel: (numbers)																		
<table border="1" style="margin: auto; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%;">Proposed</th> <th style="width: 20%;">Existing</th> </tr> </thead> <tbody> <tr> <td>Military:</td> <td></td> <td></td> </tr> <tr> <td>Civilian:</td> <td></td> <td></td> </tr> <tr> <td>Contractor:</td> <td></td> <td></td> </tr> <tr> <td>Other:</td> <td></td> <td></td> </tr> </tbody> </table>					Proposed	Existing	Military:			Civilian:			Contractor:			Other:		
	Proposed	Existing																
Military:																		
Civilian:																		
Contractor:																		
Other:																		
4. Facility Number/Types																		
<u>Personnel</u>	<u>NEW</u>	<u>Class/Division</u>	Distance* <u>Actual/Required</u>															
5. Siting Rationale:																		
* Distance from project: Specify IB, (Inhabited Building); IL, (Intraline); IM, (Intermagazine); PTR, (Public Transportation Route); B, (Barricaded); UB, (Unbarricaded)																		
6. Signature of public Works/Base Civil Engineer (Name/Code) Incl E-Mail Address		9. Signature of Explosive Safety Officer/Installation Safety Officer Incl E-Mail Address																
7. Telephone Numbers: () DSN	8. Date:	10. Telephone Numbers: () DSN	11. Date:															

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REQUEST FOR PROJECT SITE APPROVAL/EXPLOSIVES SAFETY CERTIFICATION NAVFAC 11010/31 (REV. 5-2001)		
PART II DIVISION B - AIRFIELD SAFETY		
INSTRUCTIONS IN NAVFACINST 11010.45		
1. Runway Number and Type:	2. Airfield Elevation:	3. Ground Elevation at Project Site:
4. Lateral Distance from Runway Centerline:	5. Height of Facility:	
6. Horizontal Distance to Primary Surface or Edge of Parking Apron:		
7. Siting Rationale:		
8. Existing Waivers:		
9. Zoning: (Including AICUZ zone & civilian zoning designation if applicable)		
10. Point of Contact: - Include E-Mail Address	12. Requested By:	
11. Telephone Number: () NSN	13. Date:	

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REQUEST FOR PROJECT SITE APPROVAL/EXPLOSIVES SAFETY CERTIFICATION NAVFAC 11010/31 (REV. 5-2001)
PART II DIVISION C - ELECTROMAGNETIC RADIATION SAFETY
INSTRUCTIONS IN NAVFACINST 11010.45

1. TRANSMITTER

(a) Manufacturer's Name/Type:

(b) Nomenclature:

(e) Output Power Information

(1) Peak Envelope Power (PEP):

(g) Pulse Characteristics

(1) Pulse Width:

(c) Frequency Allocation Status:

(2) Mean/Average Power:

(2) Pulse Repetition Frequency (PRF):

(d) Frequency Range:

(f) Modulation Type Information:

☐ Pulsed ☐ FM ☐ AM ☐ Other

(3) Duty Cycle:

2. LINEAR ANTENNA

(a) Manufacturer's Name/Type:

(b) Nomenclature:

(d) Height Above Ground:

(f) Polarization/Pattern:

(c) Dimensions:

(e) Elevation Angle:

(g) Main Beam Gain:

(h) Coverage Angle:

3. APERTURE ANTENNA

(a) Manufacturer's Name/Type:

(b) Nomenclature:

(f) Horizontal Beamwidth:

(i) Gain: (1) Main Beam:

(2) 1st Side Lobe Gain:

(c) Dimension:

(g) Vertical Beamwidth:

(j) Coverage Angle:

(d) Height Above Ground:

(h) Scan Characteristics:

(1) Type of Scanning:

(e) Minimum Antenna Elevation Angle:

(2) Vertical/Horizontal Scanning Coverage:

4. HERP (Hazard of EMR to Personnel)

(a) Distance to nearest occupied building - describe:

(b) Description of intended method to restrict access to potential EMR hazard zones:

5. HERF (Hazard of EMR to Fuel)

(a) Distance to nearest fueling facility operation:

(b) Type of fuel in vicinity:

6. HERO (Hazards of EMR to Ordnance) - Complete Part II Division A:

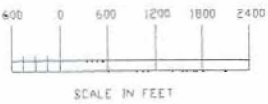
7. Point of Contact:

9. Requested By:

8. Telephone Number:

10. Date:

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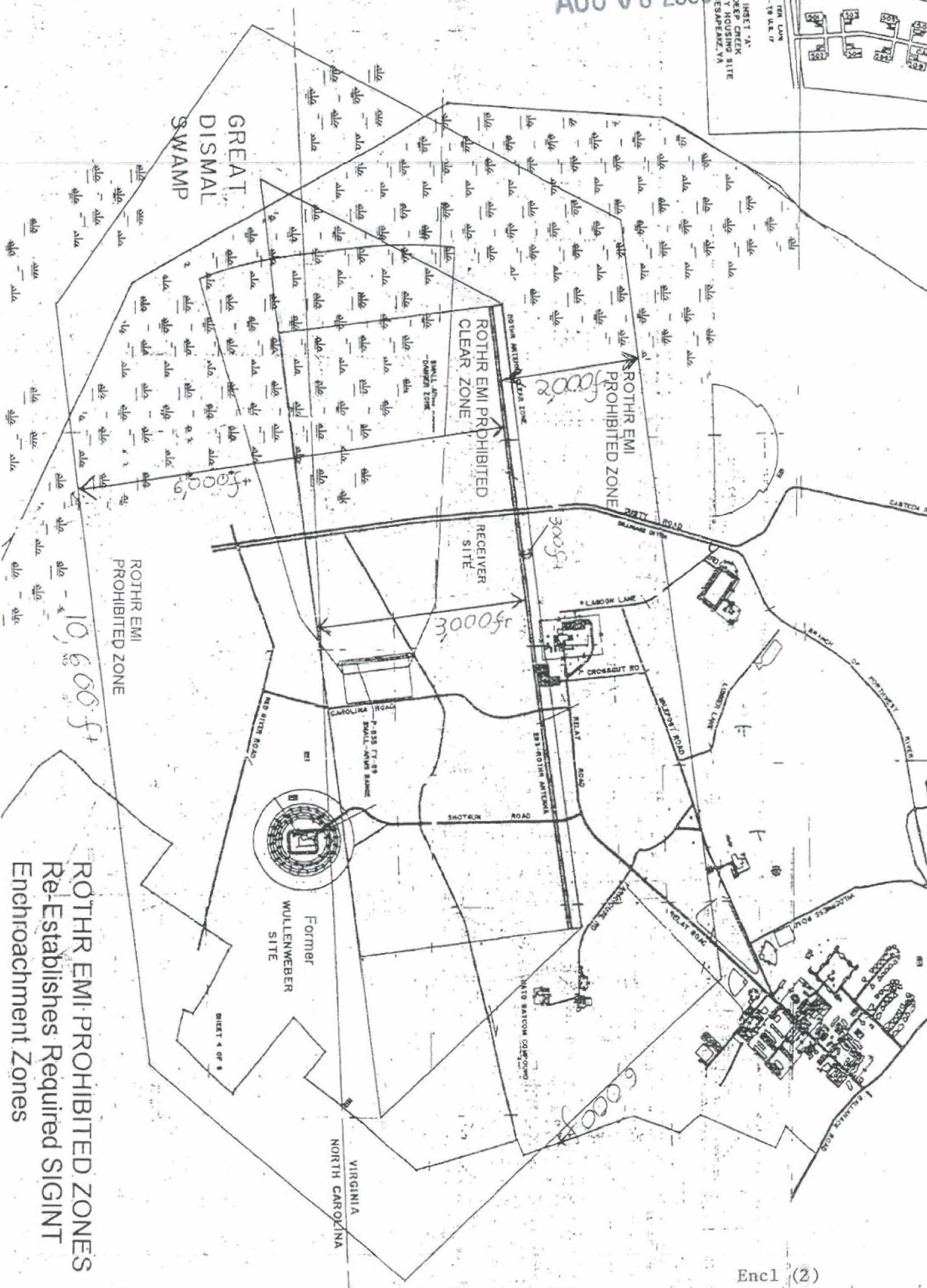
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ROTHR EMI QUESTIONNAIRE

1. Provide a short description of your project and a location drawing.
2. What is the purpose/function of your project?
3. What activities will be conducted upon completion of the project?
4. Is your project located within a ROTHR EMI zone? If so which zone?
5. If located within a ROTHR EMI zone does your project exceed the elevation restrictions of that zone.
6. What building material will be used for your building and will any portion of the building be RF shielded?
7. Will construction be IAW military standards and specifications?
8. What type of electrical and electronic equipment will be installed in the building?
 - a. Are there any emitters of Radio Frequency or Infrared energy?
 - b. Will there be any Wireless Communications used?
 - c. How and when will this equipment be operated? (e. g., 24/7, nighttime, week days)
9. Does your project include an Uninterruptible Power Supply (UPS) and/or generators and will the project require any Exposed or Overhead Power Lines?
10. Are there plans to add equipment or change the use of your project in the near future, or at any time?
11. Will the project require flight operations?
12. Will there be an increase in motor vehicle traffic upon project completion?
 - a. If so, how much?
 - b. Show routing of vehicle site access on location drawing

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INSET: 11-
DEPT. OF DEFENSE
MILITARY PROSECUTION SITE
CHESAPEAKE, VA



ROTHR EMI PROHIBITED ZONES
Re-Establishes Required SIGINT
Enchroachment Zones